PROCESSED

JUN 2 4 2002

THOMSON THOMSON

AL UNITED STATES
SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1138488

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2002

Estimated average burden

SEC USE ONLY

Prefix

Serial

DATE RECEIVED

Name of Offering (Ceck if this is										
Placement of \$3,000,000 15% Se	nior Convertible No	tes Due 2007 and \$	3,000,000 15%	Senior Subordinated Convertible Notes Due						
2007										
Filing Under (Check box(es) that		<u>ule 504 [] Rul</u>	e <u>505</u> [X]R	ule 506 [] Section 4(6) [] ULOE						
Type of Filing: [X] New Filing	[] Amendment									
	A. BA	SIC IDENTIFIC.	ATION DATA	RECEIVED						
1. Enter the information requeste	ed about the issuer			MAY 8 1 2002						
	Name of Issuer (check if this is an amendment and name has changed, and indicate change.) WebGen Systems, Inc. formerly WebGen Electricity Co., Inc.									
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Linksey Way, Cambridge, Massachusetts 02142 (617) 349-0724										
		and Street, City, Sta	ate, Zip Code)	Telephone Number (Including Area Code)						
(if different from Executive Offic	es)			· · · · · · · · · · · · · · · · · · ·						
Brief Description of Business										
		ilization services to	large users and	d suppliers of electric energy through the use						
of proprietary technology and the	Internet.									
Type of Business Organization										
[X] corporation	[] limited partners	hip, already formed	1	[] other (please specify):						
[] business trust	[] limited partners	hip, to be formed								
		Month Year								
Actual or Estimated Date of Incor Organization:	poration or	05 00		[X] Actual [] Estimated						
Jurisdiction of Incorporation or O		wo-letter U.S. Post da; FN for other for								

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> (6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not



manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply: [X] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Weaver, David R Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that Apply: [X] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Brickfield, Peter J.P. Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, f individual) B-W Energy, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Pinnell, Kevin C.	Each general and managing partner of partnership issuers.	
Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that Apply: [X] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Brickfield, Peter J.P. Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, f individual) B-W Energy, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner		
Check Box(es) that Apply: [X] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Brickfield, Peter J.P. Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, f individual) B-W Energy, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner	Full Name (Last name first, if individual) Weaver, David R.	
Full Name (Last name first, if individual) Brickfield, Peter J.P. Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, f individual) B-W Energy, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Owner Managing Partner	Business or Residence Address (Number and Street, City, State, Zip Code). 41 Linksey Way, Cambridge, Massachusetts. 0	2142
Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, f individual) B-W Energy, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Owner Managing Partner		
Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, f individual) B-W Energy, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner	Full Name (Last name first, if individual) Brickfield, Peter J.P.	
Apply: Owner Managing Partner Full Name (Last name first, f individual) B-W Energy, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Apply: Owner Managing Partner	Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02	2142
Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02142 Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Apply: Owner Owner		
Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Director [] General and/or Apply: Owner Managing Partner	Full Name (Last name first, f individual) B-W Energy, LLC	
Apply: Owner Managing Partner	Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambridge, Massachusetts 02	142
Full Name (Last name first, if individual) Pinnell, Kevin C.		
	'ull Name (Last name first, if individual) Pinnell, Kevin C.	

Business or Residence Address (Number and Street, City, State, Zip Code) 200 S. College St., 10 th F	loor, Ch	narlotte, NC 28255
Check Box(es) that [] Promoter [X] Beneficial [] Executive Officer [] Direct Apply:	or []	General and/or Managing Partner
Full Name (Last name first, if individual) Suffolk Trading Limited	had a	
Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 42222, Freepon	t, Grand	Bahama, Bahamas
Check Box(es) that [X] Promoter [X] Beneficial [] Executive Officer [] Direct Apply:	or []	General and/or Managing Partner
Full Name (Last name first, if individual) Worthington Avenue, LLC (wholly owned by NB Holding America Technology Investments, Inc., Daniel Friel, Senior Vice President		
Business or Residence Address (Number and Street, City, State, Zip Code) 200 S. College Street, 10	" Floor,	Charlotte, NC 28255
Check Box(es) that [] Promoter [X] Beneficial [] Executive [X] Director Apply: Owner Officer	[]	General and/or Managing Partner
Full Name (Last name first, if individual) Friel, Daniel		
Business or Residence Address (Number and Street, City, State, Zip Code) 200 S. College Street, 10	th Floor,	Charlotte, NC 28255
Check Box(es) that [] Promoter [X] Beneficial [] Executive [] Director Apply: Owner Officer	[]	General and/or Managing Partner
Full Name (Last name first, if individual) Kruthoffer, Jan		
Business or Residence Address (Number and Street, City, State, Zip Code) N/A		3-48 (d
Check Box(es) that [] Promoter [] Beneficial [X] Executive [] Director Apply: Owner Officer		General and/or Managing Partner
Full Name (Last name first, if individual) Noyes, Mark		
Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambrid	lge, Mas	sachusetts 02142
Check Box(es) that [] Promoter [] Beneficial [X] Executive [] Director Apply: Owner Officer	[]	General and/or Managing Partner
Full Name (Last name first, if individual) Mahling, Dirk		
Business or Residence Address (Number and Street, City, State, Zip Code) 41 Linksey Way, Cambrid	lge, Mas	sachusetts 02142
(Use blank sheet, or copy and use additional copies of this sheet, as nece	essary.)	
B. INFORMATION ABOUT OFFERING		
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	<u> </u>	Yes No [] [X]
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?		N/A
3. Does the offering permit joint ownership of a single unit?		Yes No [X] []

indire securi registe persor	ctly, any of the cred with as to be li	commissi offering the SEC	on or sime. If a perse and/or with ssociated	ilar remu on to be li th a state	neration isted is a or states,	for solicit n associat list the n broker or	ation of ped persor ame of th	ourchasers or agent e broker	or given, s in conne of a brok or dealer. et forth th	ection wit er or dea If more t	h sales of ler han five (
Full N	ame (Las	t name fi	rst, if ind	ividual)										
Busi	ness or R	esidence .	Address (Number a	and Stree	t, City, St	ate, Zip (Code)						-
Nam	e of Asso	ciated Br	oker or D	ealer					-					-
State	s in Whic	h Person	Listed H	as Solicite	ed or Inte	ends to So	licit Purc	hasers						•
(Checle [AL]	k "All Sta [AK] [IN]	tes" or ch [AZ] [IA]	neck indiv [AR] [KS]	ridual Stat [CA] [KY]	tes) [CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[] [GA] [MN]	All State [HI] [MS]	es [ID] [MO]		-
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
			st, if indi	vidual) Number a	nd Street	City St	ate Zin C	ode)	1,7					_
Name	of Asso	ciated Bro	oker or D	ealer										-
State	s in Whic	h Person	Listed Ha	is Solicite	d or Inte	nds to So	licit Purc	hasers						
(Checl	a "All Sta	tes" or ch	eck indiv	idual Stat	es)					[]	All State	es .		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	•	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	Vame (La	st name f	irst, if ind	ividual)			S Appelle S S S S S S S S S S S S S S S S S S	(1914) (1914) - 1916) (1914) (1000			**************************************		
Busin	ess or Re	sidence A	Address (1	Number a	nd Street	, City, Sta	ite, Zip C	ode)						
			ker or De Listed Ha	ealer s Solicite	d or Inter	nds to Sol	icit Purch	asers						-
(Check	"All Stat	es" or ch	eck indiv	dual State	es)					[]	All States	<u> </u>		-
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		-
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		

`[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
			(Use bla	nk sheet	, or copy	and use	addition	al copies	of this sh	eet, as n	ecessary.)	
		C. OFF	ERING I	PRICE, N	NUMBEI	OF IN	VESTOR	S, EXPE	NSES A	ND USE	OF PRO	CEEDS	
total a transac	mount a	lready so exchang	ld. Enter	r "0" if g, check	irities inc answer this box for excha	is "none' and ind	" or "ze icate in tl	ro." If the columi	ne				
T	ype of Se	curity				·			Aggreg Offerin			Amount Already Sold	
De	ebt	•••••				\$6,000	0,000		\$6,000,000				
Ed	quity												
			[]Comr	non [] Prefer	red							
Co	onvertible	Securitie	s (includ	ing warra	ints)				\$0			\$0	
Pa	rtnership	Interests					•••						
Ot	her (Spec	ify: Optio	ons to Ac	quire Sha	res of Co	mmon St	ock).		\$0			\$0	
	Total		••••••		•••••				\$6,000),000		\$6,000,000	
Answer	also in A	appendix,	Column	3, if filin	g under U	LOE.							
purchas purchas purchas	ed securi es. For of ed securi	ties in this fferings u	s offering nder <u>Rule</u> ie aggreg	and the a 504, indate dollar	ccredited aggregate icate the samount of zero."	dollar an number o	nounts of f persons	their who have	e				
									Number	Investor	rs	Aggregate Dollar Amount of Purchases	
Ac	credited I	nvestors					••			10		\$6,000,000	
No	n-accredi	ted Inves	tors	•••••	•••••	•••••	••			0		\$0	

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under $\underline{\text{Rule } 504}$ or $\underline{505}$, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this

Total (for filings under Rule 504 only)

•		
offering. Classify securities by type listed in Part C-Question 1.	TT OR I	
Type of offering	Type of Security	Dollar Amount Sold
Rule 505		
Regulation A		
Rule 504		
Total		
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	[]	
Printing and Engraving Costs	[]	
Legal Fees	[X]	\$175,000
Accounting Fees	[]	
Engineering Fees	[]	
Sales Commissions (specify finders' fees separately)	[]	
Other Expenses (identify):	[]	
Total	[X]	\$175,000
b. Enter the difference between the aggregate offering price given in response to Part C total expenses furnished in response to Part C - Question 4.a. This difference is the "adj proceeds to the issuer."		\$5,825,000
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposused for each of the purposes shown. If the amount for any purpose is not known, furnisestimate and check the box to the left of the estimate. The total of the payments listed in the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b at	sh an nust equal	
	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[X] \$188,000	[]
Purchase of real estate	[]	[]
Purchase, rental or leasing and installation of machinery	[]	[]

and equipment		
Construction or leasing of plant buildings and facilities	[]	[]
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]	[]
Repayment of indebtedness	[X] \$1,923,722	[X] \$902,985
Working capital	-[]	[X] \$2,640,281
Other (specify): Reacquisition of Preferred Shares	[]	[X] \$170,012
Column Totals	[X] \$2,111,722	[]\$3,713,278
Total Payments Listed (column totals added)	[X]	\$5,825,000

					L						

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under, Rule 505 the
following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written
request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) ignature WebGen Systems, Inc. ATTENTION

International misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? Yes No [] [X]

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the

undersigned duly authorized person.

Issuer (Print or Type) Signatur Date WebGen Systems, Inc. Title (Print or Type) Name of Signer (Print or Type)

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3			4		T	5		
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No	15% Senior Convertible Notes Due 2007, and 15% Senior Subordinated Convertible Notes Due 2007	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
AL											
AK						[
AZ											
AR											
CA		X	\$50,000	1	\$50,000	0	\$0		X		
СО											
CT		X	\$250,000	1	\$250,000	0	\$0		X		
DE											
DC											
FL		X	\$112,288	3	\$112,228	0	\$0		X		
GA									_		
HI						<u> </u>					
ID		<u> </u>									
IL											
IN								-			
IA				,							
KS											
KY											
LA											
ME											
MD		37	61 722 712	1 1	01 700 710		60				
MA MI		X	\$1,722,712	1	\$1,722,712	0	\$0		X		
MN MS				1							
_				· · · · · · · · · · · · · · · · · · ·			· · · · · · · ·				
MO MT											
NE			-								
INE											

. 1		2	3		<u>-</u>	4			5
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of ir amount purc (Part C	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	15% Senior Convertible Notes Due 2007, and 15% Senior Subordinated Convertible Notes Due 2007	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
NV									
NH									
ΝJ		X	\$500,000	11	\$500,000	0	\$0		X
NM									
NY		X	\$3,100,000	2	\$3,100,000	0	\$0		X
NC		X	\$265,000	1	\$265,000	0	\$0	<u> </u>	X
ND		<u> </u>			ļ				
ОН									
OK									
OR		 			l				
PA									
RI	<u> </u>						<u> </u>		
SC					<u></u>				
SD									
TN									
TX									
UT									
VT									
VA									
WA									
wv			· ·				·····		
WI									
WY									
PR									
			LL		i	L			